

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Newt 2012**

**A. Full Name (Last, First, Middle Initial)**

**MR. JAMES W. WILL**

Mailing Address **2707 GARFIELD ROAD**

City <b>TACOMA</b>	State <b>WA</b>	Zip Code <b>98403-2919</b>
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FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**600.00**

**Transaction ID : SA17.56445**

Date of Receipt

M M / D D / Y Y Y Y
<b>11 / 03 / 2011</b>

**CONTRIBUTION**

Amount of Each Receipt this Period

**250.00**

**B. Full Name (Last, First, Middle Initial)**

**MR. KELLY R. WILL**

Mailing Address **3401 DARTMOUTH AVE**

City <b>DALLAS</b>	State <b>TX</b>	Zip Code <b>75205-3234</b>
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FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**NORTH TEXAS PAIN MANAGEMENT ASSOC**

Occupation  
**PHYSICIAN**

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**220.00**

**Transaction ID : SA17.129951**

Date of Receipt

M M / D D / Y Y Y Y
<b>12 / 13 / 2011</b>

**CONTRIBUTION**

Amount of Each Receipt this Period

**220.00**

**C. Full Name (Last, First, Middle Initial)**

**VERNE M. WILLAMAN**

Mailing Address **1535 WILD RYE WAY**

City <b>ARROYO GRANDE</b>	State <b>CA</b>	Zip Code <b>93420-4935</b>
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FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17.61331**

Date of Receipt

M M / D D / Y Y Y Y
<b>11 / 07 / 2011</b>

**CONTRIBUTION**

Amount of Each Receipt this Period

**500.00**

**Subtotal Of Receipts This Page (optional)**.....

**970.00**

**Total This Period (last page this line number only)**.....